Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF INDIANA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
your gove picture ide example,	Write the name that is on your government-issued picture identification (for	William First name		Elizabeth First name
	example, your driver's license or passport).	Middle name		Middle name
	Bring your picture identification to your meeting with the trustee.	Crudden Last name and Suffix (Sr., Jr., II, III)	_	Crudden Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1409		xxx-xx-2109

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Debtor 1 William Crudden

Debtor 2 Elizabeth Crudden

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
Where you live		If Debtor 2 lives at a different address:		
3532 Secretariat Dr West Lafayette, IN 47906 Number, Street, City, State & ZIP Code Tippecanoe County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 3532 Secretariat Dr West Lafayette, IN 47906 Number, Street, City, State & ZIP Code Tippecanoe County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.		

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	otor 1 otor 2	William Crudden Elizabeth Crudder	1				Case number (if known)		
Par	t 2:	Tell the Court About	Your Bank	ruptcy C	ase				
7.	Bank	chapter of the cruptcy Code you are			brief description of each, so, go to the top of page 1 a		by 11 U.S.C. § 342(b) for Individual iate box.	nls Filing for Bankruptcy	
	choo	sing to file under	☐ Chapter 7						
			☐ Chapter 11						
			☐ Chap	ter 12					
			■ Chap	ter 13					
8.	How	you will pay the fee	abo ord a p	out how your ler. If your re-printed eed to pa	ou may pay. Typically, if y r attorney is submitting yo d address. ly the fee in installments	ou are paying the fee ur payment on your b . If you choose this op	eck with the clerk's office in your leading yourself, you may pay with cash, ehalf, your attorney may pay with a potion, sign and attach the Application.	cashier's check, or money a credit card or check with	
			☐ I re but app	equest that is not recolles to yo	quired to, waive your fee, a our family size and you are	u may request this op and may do so only if unable to pay the fee	tion only if you are filing for Chapte your income is less than 150% of e in installments). If you choose th fficial Form 103B) and file it with y	the official poverty line that is option, you must fill out	
9.		you filed for	■ No.						
		pankruptcy within the ast 8 years?	☐ Yes.						
		•		District		When	Case number		
				District		When	Case number		
				District		When	Case number _		
10.	case filed not f	any bankruptcy s pending or being by a spouse who is iling this case with or by a business	■ No □ Yes.						
	partr	ner, or by an							
	affilia	ate?		Debtor			Relationship to yo	11	
				District		When	Case number, if ki		
				Debtor			Relationship to yo		
				District		When	Case number, if ki		
11.	Do y	ou rent your	■ No.	Go to	line 12.				
	resid	lence?	□ Yes.	Has v	our landlord obtained an e	eviction judgment aga	inst you?		
			- 165.		No. Go to line 12.	, , g aga	, ,		
						ment About an Evictio	on Judgment Against You (Form 10	O1A) and file it as part of	

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	otor 1 William Crudden otor 2 Elizabeth Crudder	า		Case number (if known)	
Par	22. Bonort About Any Ru	oinocco	You Own as a Sole Propr	intor	
	Are you a sole proprietor	311163363	Tou Own as a Sole Fropi	ietoi	
12.	of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of b	pusiness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if ar	ny	
	If you have more than one sole proprietorship, use a		Number, Street, City, S	state & ZIP Code	
	separate sheet and attach it to this petition.		Check the appropriate	box to describe your business:	
			☐ Health Care Bu	siness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Re	eal Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as	s defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))	
			☐ None of the abo	ove	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the pro			
	For a definition of small	■ No.	I am not filing under Ch	apter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to public health or safety?	□ 165.	What is the hazard?		
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed'	?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is the property?		
	urgent repairs?			Number, Street, City, State & Zip Code	

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Debtor 1	William Crudden		
Debtor 2	Elizabeth Crudden	Case number (if known)	
		-	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

■ I received a briefing from an approved credit

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debi		Crudden n Crudden	l			Case nu	umber (if knov	wn)	
Part	6: Answer Th	ese Questi	ons for Re	porting Purposes					
16.	What kind of de you have?	ebts do		Are your debts primarily consun individual primarily for a personal, ☐ No. Go to line 16b.			e defined in	11 U.S.C. § 101(8) as "incurre	d by an
				Yes. Go to line 17.					
16b. Are your debts primarily business debts? Business debts are debts to money for a business or investment or through the operation of the business or investment or through the operation of the business debts?									
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c. -	State the type of debts you owe the	at are not consun	ner debts or bus	siness debts	S	
17.	Are you filing u Chapter 7?	nder	■ No.	I am not filing under Chapter 7. Go	to line 18.				
Do you estimate that after any exempt property is excluded and		ot		I am filing under Chapter 7. Do you are paid that funds will be available				excluded and administrative e	xpenses
	administrative e	expenses		□ No					
	be available for distribution to u			☐ Yes					
18.		ow many Creditors do ou estimate that you	1 -49		☐ 1,000-5,000			25,001-50,000	
	owe?	ui you	☐ 50-99 ☐ 100-19 ☐ 200-99		☐ 5001-10,000 ☐ 10,001-25,00			☐ 50,001-100,000 ☐ More than100,000	
19.	How much do y estimate your a be worth?		□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$10,000,001 \$10,000,001 \$100,000,000	- \$50 million - \$100 million	[]	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do y estimate your li to be?		\$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,00	- \$50 million - \$100 million] [□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Part	7: Sign Below	v							
For	you		I have exa	amined this petition, and I declare u	ınder penalty of p	erjury that the i	information	provided is true and correct.	
				hosen to file under Chapter 7, I am ates Code. I understand the relief a					e 11,
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
			I request r	elief in accordance with the chapte	er of title 11, Unite	ed States Code,	, specified ir	n this petition.	
			bankruptc and 3571.						
			/s/ Willia William	m Crudden Crudden		/s/ Elizabeth		<u> </u>	
				of Debtor 1		Signature of D			
			Executed	on February 14, 2019 MM / DD / YYYY		Executed on	February MM / DD /		

Debtor 1 Debtor 2	William Crudden Elizabeth Crudder	1			Cas	se number (if known)
represen	attorney, if you are ted by one	under Chapt for which the	ter 7, 11, 12, or 13 of title 11, e person is eligible. I also ce	, United States Coertify that I have de	de, and have elivered to the	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) yledge after an inquiry that the information in the
	ey, you do not need		led with the petition is incorre		nave no know	reage after an inquiry that the information in the
		/s/ Harry Z	embillas		Date	February 14, 2019
			Attorney for Debtor			MM / DD / YYYY
		Harry Zem	billas			
		Printed name				
		Chern Lav	v LLC			
		Firm name				
		301 S. Mai	• .			
			int, IN 46307			
		Number, Street,	City, State & ZIP Code			
		Contact phone	219-661-6000		Email address	dikigoros@yahoo.com
		20442-45 I	N			
		Bar number & S	tate			

Debt	or 1 William Crudden		
	William Oradaon		
	First Name Middle Name Last Name		
Debt			
(Spous	se if, filing) First Name Middle Name Last Name		
Unite	d States Bankruptcy Court for the: NORTHERN DISTRICT OF INDIANA		
Case (if know	numberwn)	☐ Che	ck if this is an
		ame	nded filing
Sun Be as inforr	icial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information complete and accurate as possible. If two married people are filing together, both are equally responsible nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amenoriginal forms, you must fill out a new Summary and check the box at the top of this page.		
Part	1: Summarize Your Assets		
		v	,
			assets of what you own
	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	225,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	327,600.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	552,600.00
Part :	2: Summarize Your Liabilities		
		Your	liabilities
			nt you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	198,851.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,400.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	115,489.83
	Your total liabilities	\$ \$	316,740.83
Part :	3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,928.69
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,221.00
Part -	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily fo	a persona	al, family, or
	household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	s <i>box</i> and	submit this form to

Official Form 106Sum

page 1 of 2

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Debtor 2	Elizabeth Crudden	Case number (if known)		
8 From	m the Statement of Your Current Monthly Income Co.	ny your total current monthly income from Official F	orm	

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,248.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 William Crudden

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,400.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,400.00

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					r information you wish to add about this ite erty identification number:	m, such as lo	cal	
	County			Debtor 1 and Debtor 2 only At least one of the debtors and another		k if this is com structions)	munity property	
	Tippecanoe County							
	Tinnecanos				has an interest in the property? Check one Debtor 1 only		e), if known. / by the En	tirety
						(such as f	ee simple, ten	our ownership interest ancy by the entireties, or
	City	State	ZIP Code		Investment property	· · · · · · · · · · · · · · · · · · ·	25,000.00	\$225,000.00
	West Lafayette	e IN	47906-0000		Manufactured or mobile home Land	Current va		Current value of the portion you own?
					Condominium or cooperative	Creditors V	vno Have Clair	ns Secured by Property.
	Street address, if available		cription		Single-family home Duplex or multi-unit building	the amoun	Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule I Creditors Who Have Claims Secured by Propert	
1.1	3532 Secratari	iat Dr		_	t is the property? Check all that apply	uot ooo wad -l-	ima or everntions. Dut	
•	Yes. Where is the p	property?						
	No. Go to Part 2.		uitable interest in a	any resid	lence, building, land, or similar property?			
Part	1: Describe Each	Residence, B	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In			
hink nforr	it fits best. Be as o	complete and a	accurate as possibl	le. If two	married people are filing together, both are his form. On the top of any additional pages	equally resp	onsible for su	pplying correct
	hedule A			an asset	only once. If an asset fits in more than one	e category. lie	st the asset in	12/15 the category where you
	icial Form		_					
Cas	e number							☐ Check if this is ar amended filing
	ed States Bankrup	otcy Court for	the: NORTHER	N DIST	RICT OF INDIANA			
(Spou		rst Name		e Name	Last Name			
Deb		rst Name lizabeth Cr		e Name	Last Name			
Deb	tor 1 W	/illiam Crud	dden					

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debt Debt		Villiam Crudden Elizabeth Crudden	Ca	ase number (if known)	
3. C a	rs, vans	, trucks, tractors, sport utility	vehicles, motorcycles		
	No				
_	Yes				
3.1	Make:	SUBARU	Who has an interest in the property? Check one	Do not deduct secured claims or	
	Model:	OUTBACK	☐ Debtor 1 only	the amount of any secured claim Creditors Who Have Claims Sec	s on Schedule D: ured by Property.
	Year:	2017	Debtor 2 only		ent value of the
	Approxi	mate mileage: 35000	■ Debtor 1 and Debtor 2 only		on you own?
	Other in	formation:	☐ At least one of the debtors and another		
	LEASE	ED VEHICLE		\$0.00	\$0.00
			LI Check if this is community property (see instructions)		\$0.00
			J , ,		
3.2	Make:	SUBARU	Who has an interest in the property? Check one	Do not deduct secured claims or	exemptions. Put
5.2	Model:	LEGACY	Debtor 1 only	the amount of any secured claim Creditors Who Have Claims Sec	
	Year:	2016	Debtor 2 only		
		mate mileage: 30000	-		ent value of the on you own?
	• • •	formation:	☐ At least one of the debtors and another	promo proposigi	,
	LEASE	ED VEHICLE		***	
			Check if this is community property (see instructions)	\$0.00	\$0.00
	Yes		over for all of vivin outsing from Dout 2 in aboding		
			own for all of your entries from Part 2, including and the that number here		\$0.00
		ibe Your Personal and Household			
Do y	ou own (or have any legal or equitable	interest in any of the following items?	portion Do not	t value of the n you own? deduct secured or exemptions.
E		goods and furnishings Major appliances, furniture, line	ns, china, kitchenware		·
	Yes. De	escribe			
					\$0.500.00
		FURNITURE A	AND APPLIANCES		\$2,500.00
	ectronics kamples:		rideo, stereo, and digital equipment; computers, printe, media players, games	ers, scanners; music collections; ele	
	Yes. De	escribe			ectronic devices
	Yes. De		JONES TARIET COMPUTER DVD CANNO		ectronic devices
	Yes. De		HONES, TABLET, COMPUTER, DVD, GAMINO	3	ectronic devices \$2,000.00

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Debi		illiam Crudden izabeth Crudden Case numbe	er (if known)
E		of value .ntiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sther collections, memorabilia, collectibles	stamp, coin, or baseball card collections;
	Yes. Desc	cribe	
Е	Examples: Sp	or sports and hobbies sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sk nusical instruments	xis; canoes and kayaks; carpentry tools;
	Yes. Desc	cribe	
		GOLF CLUBS, BIKES	\$300.00
_	Firearms Examples: F I No I Yes. Desc	Pistols, rifles, shotguns, ammunition, and related equipment cribe	
		2 PISTOLS	\$600.00
12. J	No Yes. Desc	CLOTHES	\$100.00
	Examples: E ■ No ■ Yes. Desc	Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch cribe	es, gems, gold, silver
	Non-farm an Examples: □ I No I Yes. Desc	Dogs, cats, birds, horses	
		3 DOGS	\$0.00
] No	personal and household items you did not already list, including any health aids you did	I not list
		SNOW BLOWER LAWN MOWER, STORAGE SHED	\$2,000.00
15.		ollar value of all of your entries from Part 3, including any entries for pages you have at Write that number here	stached \$7,500.00
Part		e Your Financial Assets	Our control of the
ро у	you own or	have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions

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	ebtor 1 ebtor 2	William Crudden Elizabeth Crudden	Case number (if known)	
16.	■ No	oles: Money you have in your wallet, in your	home, in a safe deposit box, and on hand when you file your petition	
17.		ts of money les: Checking, savings, or other financial acinstitutions. If you have multiple accour	ecounts; certificates of deposit; shares in credit unions, brokerage houses, atts with the same institution, list each.	and other similar
			Institution name:	
		17.1.	CHASE BANK CHECKING AND SAVINGS	\$100.00
18.		mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with b	prokerage firms, money market accounts	
	_	Institution or issue	er name:	
19.	Non-pu joint v		porated and unincorporated businesses, including an interest in an L	LC, partnership, and
		Give specific information about them Name of entity:		
	Negotia Non-ne		gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
21.		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k)	, 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	_	List each account separately. Type of account:	Institution name:	
			401Ks 204k husband 120k wife	\$320,000.00
22.	Your sl		so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies, or c	others
	☐ Yes.		Institution name or individual:	
23.	Annuiti ■ No	ies (A contract for a periodic payment of mo	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.	Interest 26 U.S.0	s in an education IRA, in an account in a C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition program.	
	☐ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	■ No		(other than anything listed in line 1), and rights or powers exercisable	e for your benefit
	☐ Yes.	Give specific information about them		

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Debtor 1 Debtor 2	William Crudden Elizabeth Crudden	Case number (if known)	
Examp	s, copyrights, trademarks, trade secrets, and other intellectual poles: Internet domain names, websites, proceeds from royalties and		
■ No □ Yes.	Give specific information about them		
Exam _l ■ No	es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association has Give specific information about them	oldings, liquor licenses, professional licenses	S
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax ref	funds owed to you		
■ No □ Yes.	Give specific information about them, including whether you already	filed the returns and the tax years	
■ No	support oles: Past due or lump sum alimony, spousal support, child support, Give specific information	maintenance, divorce settlement, property s	settlement
Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else Give specific information	s, sick pay, vacation pay, workers' compens	sation, Social Security
	ets in insurance policies bles: Health, disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insuranc	ce
■ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	LIFE INSURANCE THROUGH WORK	_	Unknown
If you a some o	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information	ance policy, or are currently entitled to recei	ve property because
Exam _p ■ No	s against third parties, whether or not you have filed a lawsuit or ples: Accidents, employment disputes, insurance claims, or rights to		
34. Other o	contingent and unliquidated claims of every nature, including continues to be carried as the continues of th	ounterclaims of the debtor and rights to s	set off claims
■ No	nancial assets you did not already list Give specific information		

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Debt Debt			Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, includition for Part 4. Write that number here			\$320,100.00
Part	Describe Any Business-Related Property You Own or Have an Int	erest In. List any real esta	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-rela	ated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property Yol If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
	o you own or have any legal or equitable interest in any farm	n- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That You	ou Did Not List Above		
	o you have other property of any kind you did not already lis	st?		
	Examples: Season tickets, country club membership			
_	No Yes. Give specific information			
_	res. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$225,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$7,500.00		
58.	Part 4: Total financial assets, line 36	\$320,100.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$327,600.00	Copy personal property to	stal \$327,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$552,600.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	William Crudden			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth Crudde	en		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

 Which set of exemptions are you claiming? Check one only, even if your spouse is filling wi

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
	Copy the value from Check only one box for each exemption. Schedule A/B				
FURNITURE AND APPLIANCES Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00	Ind. Code § 34-55-10-2(c)(2	
Ellie II oli i ochedale 74 B. G. I			100% of fair market value, up to any applicable statutory limit		
TVS, CELL PHONES, TABLET, COMPUTER, DVD, GAMING SYSTEM	\$2,000.00		\$2,000.00	Ind. Code § 34-55-10-2(c)(2	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
GOLF CLUBS, BIKES Line from Schedule A/B: 9.1	\$300.00		\$300.00	Ind. Code § 34-55-10-2(c)(2	
Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit		
2 PISTOLS Line from Schedule A/B: 10.1	\$600.00		\$600.00	Ind. Code § 34-55-10-2(c)(2	
Line nom Schedule A.B. 10.1			100% of fair market value, up to any applicable statutory limit		
CLOTHES Line from Schedule A/B: 11.1	\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(2	
LINE HOLL SUITEGUIE A.B. TT.T			100% of fair market value, up to any applicable statutory limit		

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Debt				Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	SNOW BLOWER LAWN MOWER, STORAGE SHED	\$2,000.00		\$2,000.00	Ind. Code § 34-55-10-2(c)(2)
	ine from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
	CHASE BANK CHECKING AND	\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(3)
	ine from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	101Ks 204k husband	\$320,000.00		\$380,000.00	Ind. Code § 34-55-10-2(c)(6)
-	120k wife Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
_	LIFE INSURANCE THROUGH WORK	Unknown		\$0.00	Ind. Code §§ 27-1-12-14, 27-2-5-1(c)
	and nom deficulte Add. \$1.1			100% of fair market value, up to any applicable statutory limit	21 2 3 1(0)
(I	Are you claiming a homestead exemption of Subject to adjustment on 4/01/19 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	years after that for ca	ises fi	,	,

	Case	19-40047-1eg Doc 1 Filed 02/	14/19 Paye 1	.8 01 05	
Fill in this informat	tion to identify you	ur case:			
Debtor 1	William Crudde	n			
_	First Name	Middle Name Last Name			
_	Elizabeth Crude				
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	ruptcy Court for the	: NORTHERN DISTRICT OF INDIANA			
Case number					
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Form	106D				
		s Who Have Claims Secured	by Property	J	12/15

is needed, copy the Ac		If two married people are filing together, both are eq out, number the entries, and attach it to this form. Or			
number (if known).					
1. Do any creditors ha			ou have nothing also to	roport on this form	
_		his form to the court with your other schedules. Yo	ou have nothing else to	report on this form.	
	of the information	below.			
•	Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabeti		ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Home Point	Financial C	Describe the property that secures the claim:	\$198,851.00	\$225,000.00	\$0.00
Creditor's Name		3532 Secratariat Dr West Lafayette,			
		IN 47906 Tippecanoe County			
Nmls#7706 9	9 Entin Rd St	As of the date you file, the claim is: Check all that apply.			
Parsippany,	NJ 07054	Contingent			
Number, Street, City	y, State & Zip Code	Unliquidated			
Who owes the debt?	? Check one	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the o		☐ Judgment lien from a lawsuit			
Check if this claim community debt	n relates to a	Other (including a right to offset)			
	Opened				
	02/16 Last				
Date debt was incurre	Active ed 6/22/18	Last 4 digits of account number 2609			
			 _		
	•	Column A on this page. Write that number here:	\$198,85	1.00	
if this is the last pag	ge ot your form, add	the dollar value totals from all pages.	\$198.85	1.00	

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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							İ	
1	II in this inform	ation to identify your	case:					
De	ebtor 1	William Crudden First Name	Middle Nove	L agt Nam				
ח	ebtor 2	Elizabeth Crudde	Middle Name	e Last Nan	ie			
	oouse if, filing)	First Name	Middle Name	e Last Nan	ne			
Ur	nited States Ban	kruptcy Court for the:	NORTHERN D	DISTRICT OF INDIANA				
		., .,						
	ase number						☐ Check	if this is an
(anom,						_	ded filing
_								3
_	fficial Form							
				Insecured Claim				12/15
Sch Sch left nar	nedule G: Executo nedule D: Credito . Attach the Conti ne and case num	ory Contracts and Unexp rs Who Have Claims Sec nuation Page to this pag	ired Leases (Offic ured by Property. je. If you have no i	in a claim. Also list executial Form 106G). Do not incl If more space is needed, c information to report in a P	ude any cre	editors with partially s t you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
_		s have priority unsecure						
	☐ No. Go to Pa		,					
	Yes.							
2.	identify what type possible, list the Part 1. If more th	e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	as both priority and er according to the articular claim, list th	more than one priority unsect nonpriority amounts, list that creditor's name. If you have rate other creditors in Part 3. for this form in the instruction	claim here a nore than tw	and show both priority a	and nonpriority amoun aims, fill out the Conti	ts. As much as nuation Page of Nonpriority
	INTERN	AL REVENUE SERV	ICE				amount	amount
2.	1 (INDIANA	A)	_	4 digits of account number		\$2,400.00	\$2,400.00	\$0.00
	COMPLIA PO BOX STOP SE		When	n was the debt incurred?	2017		-	
		eet City State Zlp Code	As of	f the date you file, the clain	is: Check	all that apply		
	Who incurred	the debt? Check one.	□с	ontingent				
	Debtor 1 on	ly	□υ	nliquidated				
	Debtor 2 on	ly	□р	isputed				
	Debtor 1 an	d Debtor 2 only	Туре	of PRIORITY unsecured cl	aim:			
	☐ At least one	of the debtors and another	er 🗆 D	omestic support obligations				
	☐ Check if th	is claim is for a commu	nity debt	axes and certain other debts	you owe the	government		
		bject to offset?	□с	laims for death or personal ir	njury while yo	ou were intoxicated		
	■ No □ Yes		۵о	ther. Specify				-
	L res							
Pa	art 2: List All	of Your NONPRIORIT	Y Unsecured Cl	laims				
3.	Do any creditor	s have nonpriority unsec	cured claims agair	nst you?				
	☐ No. You have	e nothing to report in this p	art. Submit this forr	n to the court with your other	schedules.			
	Yes.							
4.	unsecured claim	, list the creditor separately	y for each claim. Fo	petical order of the creditor or each claim listed, identify w rs in Part 3.If you have more	hat type of o	claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

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	Elizabeth Crudden		Case number (if known)	
4.1	Amex	Last 4 digits of account number	4123	\$12,146.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 08/16 Last Active 8/21/17	, ,
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number	3873	\$11,503.00
	Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 08/16 Last Active 8/21/17	
	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.3	Amex	Last 4 digits of account number	0643	\$1,326.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 08/16 Last Active 7/01/17	
	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	•		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No			
	Yes	■ Other. Specify Credit Card	<u> </u>	

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	r 1 William Crudden ^{r 2} Elizabeth Crudden		Case number (if known)	
4.4	BorrowersFirst	Last 4 digits of account number	9929	\$14,102.00
	Nonpriority Creditor's Name Email: BorrowersFirst@FA-servicing.com San Diego, CA 92150 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim in	Opened 5/19/16 Last Active 3/20/17 s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.5	Capital One	Last 4 digits of account number	7200	\$5,792.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/15 Last Active 1/27/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.6	Capital One	Last 4 digits of account number	8687	\$4,048.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 11/12 Last Active 3/04/17	
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	■ No			
	Yes	Other. Specify Credit Card		

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	2 Elizabeth Crudden		Case number (if known)	
4.7	Capital One	Last 4 digits of account number	2299	\$2,769.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/15 Last Active 4/17/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.8	Capital One / Furnit	Last 4 digits of account number	0123	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 03/16 Last Active 06/18	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.9	CENTRAL CREDIT SERVICES / FURNITURE ROW	Last 4 digits of account number	7387	\$3,709.87
	Nonpriority Creditor's Name CAPITAL ONE / JH PORTFOLIO DEBT EQUITIES	When was the debt incurred?	2017	
	O BOX 390916 Minneapolis, MN 55439-0916 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	or chook an anal apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify CREDIT CA	RD	
				

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Debtor :	William Crudden Elizabeth Crudden		Case number (if known)	
0	Chase Card Services	Last 4 digits of account number	3976	\$4,323.00
	Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 08/16 Last Active 7/19/18	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only —	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
4.1	Chase Card Services	Last 4 digits of account number	8042	\$2,651.00
	Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 10050	When was the debt incurred?	Opened 05/16 Last Active 7/02/18	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin 	ration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Lease	g plans, and other similar debts	
4.1	Chase Card Services	Last 4 digits of account number	0520	\$2,495.00
	Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 04/16 Last Active 4/25/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card	<u> </u>	

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	Milliam Crudden Elizabeth Crudden			
4.1 3	Chase Card Services	Last 4 digits of account number	2423	\$0.00
	Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 02/14 Last Active 9/01/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	□ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	debt Is the claim subject to offset? No	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	Yes	■ Other. Specify Lease	g pane, and other similar costs	
4.1	Chase Mortgage Nonpriority Creditor's Name	Last 4 digits of account number	5680	\$0.00
	Attn: Case Research & Bankruptcy Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 10/31/07 Last Active 6/18/10	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Real Estate	• •	
44		Onlor. Opeonly		
4.1 5	CITI ARDS / MACYS Nonpriority Creditor's Name	Last 4 digits of account number	8083	\$429.17
	PO BOX 6167 Sioux Falls, SD 57117-6167 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	2017 s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans	d claim:	
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify CREDIT CA	• •	
	— ·	— Other. Specify		

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	William Crudden Elizabeth Crudden			
0 1	Citibank HILTON HONORS	Last 4 digits of account number	1728	\$4,784.57
	Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 01/16 Last Active 2/17/17	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
<i> </i>	Citicards - AMERICAN AIRLINES Nonpriority Creditor's Name	Last 4 digits of account number	3080	\$4,560.00
	Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179	When was the debt incurred?	Opened 08/15 Last Active 4/22/17	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	• •	
	Yes	Other. Specify Credit Card	<u> </u>	
0	Citifinancial Nonpriority Creditor's Name	Last 4 digits of account number	1594	\$0.00
	Attn: Bankruptcy 605 Munn Dr Fort Mill, SC 29715	When was the debt incurred?	Opened 04/08 Last Active 10/15/13	
=	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	·	g plane, and other entitle debte	
	□ res	Other. Specify Unsecured		

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Debtor 2	William Crudden Elizabeth Crudden			
	Comenity Bank/ctpr&bks	Last 4 digits of account number	4872	\$550.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 02/14 Last Active 6/14/16	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	_	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No □ Yes	Other. Specify Charge Acc	= :	
	Comenity Bank/Lane Bryant	Last 4 digits of account number	6689	\$335.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/15 Last Active 4/14/17	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
	Comenitybank/meijer Nonpriority Creditor's Name	Last 4 digits of account number	3789	\$1,276.00
	Attn: Bankruptcy Po Box 182273 Columbus, OH 43218	When was the debt incurred?	Opened 06/14 Last Active 4/21/17	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

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CREDIT CONTROL	Last 4 digits of account number	2031	\$523.43
Nonpriority Creditor's Name DEPARTMENT STORES NATIONAL BANK / MACYS PO BOX 31179 Tampa, FL 33631-3179	When was the debt incurred?	2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	■ Other. Specify CREDIT CA	ARD	
Deville Mgmt	Last 4 digits of account number	78N1	\$14,042.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1987	When was the debt incurred?	Opened 10/17	
Colleyville, TX 76034 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	a plane, and other similar debts	
	·		
☐ Yes	Other. Specify Collection I	Attorney Borrowersfirst Lot807	
ELASTIC.COM Nonpriority Creditor's Name	Last 4 digits of account number	0418	\$1,500.00
PO BOX 950276 Louisville, KY 40295	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify LOAN		

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Indiana Univeristy Heatlh	Last 4 digits of account number	SEVERAL	\$788.15
Nonpriority Creditor's Name 250 N. Shadeland Ave Indianapolis, IN 46219	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
■ No □ Yes	Other. Specify MEDICAL	g plans, and other similar debts	
IU Health	Last 4 digits of account number	9796	\$141.66
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1-11.00
PO BOX 4374	When was the debt incurred?	2017	
Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,	,	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify MEDICAL		
Jn Portfolio Debt Equities, LLC	Last 4 digits of account number	9825	\$3,710.00
Nonpriority Creditor's Name Attn: Bankruptcy 5757 Phantom Dr. Ste 225	When was the debt incurred?	Opened 11/17	
Hazelwood, MO 63042 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only	_		
	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
At least one of the debtors and another	Student loans	u Ciaiiii.	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	adion agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	■ Other. Specify N.A.	Company Account Capital One	

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r 2 Elizabeth Crudden		Case number (if known)	
Kohls/Capital One	Last 4 digits of account number	3743	\$1,062.00
Nonpriority Creditor's Name Kohls Credit	_	Opened 11/14 Last Active	
Po Box 3120	When was the debt incurred?	4/23/17	
Milwaukee, WI 53201			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Lending Club Corp	Last 4 digita of account growther	2557	\$1,400.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1,+00.0
71 Stevenson St Ste 300 San Francisco, CA 94105	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alatas	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d Claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	diation agreement of divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify LAON		
Llyod & McDaniel / CITIBANK / JH			
PORTFOL Nonpriority Creditor's Name	Last 4 digits of account number	3852	\$3,355.6
11405 Park Road, Suite 200 PO BOX 23200	When was the debt incurred?	2017	
Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the olding	oneck all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the same and the same same same same same same same sam	
No	☐ Debts to pension or profit-sharing	• •	
☐ Yes	Other. Specify CREDIT CA	ARD	

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Loancare Servicing Ctr	Last 4 digits of account number	1303	Unknowr
Nonpriority Creditor's Name	_	Opened 03/15 Last Active	
3637 Sentara Way Virginia Beach, VA 23452	When was the debt incurred?	6/26/15	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify VA Real Es	tate Mortgage	
Merrick Bank/CardWorks	Last 4 digits of account number	0432	\$2,633.00
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Po Box 9201	When was the debt incurred?	Opened 06/13 Last Active 3/26/17	
Old Bethpage, NY 11804 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, to or the date you me, the claim.	e. Chook an anat appry	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Midland Funding	Last 4 digits of account number	4332	\$710.00
Nonpriority Creditor's Name	- Last 4 digits of account number		Ψ. 10.00
2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 12/17	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	<u>_</u>		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin		
	Factoring C Other. Specify Bank	Company Account Synchrony	

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ebtor 1 William Crudden ebtor 2 Elizabeth Crudden	Case number (if known)			
Service Merchandise/Samuels Jewelry Nonpriority Creditor's Name	Last 4 digits of account number	3058	\$3,383.00	
Attn: Bankruptcy Po Box 182273	When was the debt incurred?	Opened 06/15 Last Active 3/31/17		
Columbus, OH 43218 Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	■ Other Specify Charge Acc	count		
Seterus, Inc.	Last 4 digits of account number	0333	\$0.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1077	When was the debt incurred?	Opened 10/07 Last Active 4/02/15		
Hartford, CT 06143 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin			
Yes	Other. Specify Real Estate	Mortgage		
Sterling Jewelers, Inc.	Last 4 digits of account number	8702	\$0.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1799 Akron, OH 44309	When was the debt incurred?	Opened 01/16 Last Active 1/14/17		
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	■ Other Specify Charge Acc			

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Syncb/Toys R Us	Last 4 digits of account number	5317	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 11/15/15 Last Active 2/19/17	
Orlando, FL 32896	— As of the data was file the alaim i		
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
☐ Check if this claim is for a community			
debt Is the claim subject to offset?			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/ JC Penney	Last 4 digits of account number	9313	\$709.8
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 07/16 Last Active 4/21/17	
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim in the state in t		
Who incurred the debt? Check one.	•		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
☐ Check if this claim is for a community			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card		
Synchrony Bank/ JC Penneys	Last 4 digits of account number	1047	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 12/21/14 Last Active 7/31/16	
Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Пол		
■ Debtor 2 only	☐ Contingent		
_	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No □ Debts to pension or profit-sharing plans, and other		ng plans, and other similar debts	
☐ Yes ☐ Other. Specify Charge Account		naumt	

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Debtor 1 William Crudden Debtor 2 Elizabeth Crudden		Case number (if known)		
4.4 0	Synchrony Bank/Meijer	Last 4 digits of account number	5621	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 6/15/14 Last Active 9/02/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account		
	■ No □ Yes			
4.4	Target	Last 4 digits of account number	7190	\$3,376.00
	Nonpriority Creditor's Name Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440	When was the debt incurred?	Opened 10/15 Last Active 2/05/17	
Number Street City S	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community		☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes		Other. Specify Credit Card		
4.4	TEAM REHABILITATION Nonpriority Creditor's Name	Last 4 digits of account number	5903	\$575.89
	34051 GRATIOT AVE SUITE 204	When was the debt incurred?	2017	
	Clinton Township, MI 48035 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:		d claim:		
	☐ Check if this claim is for a community ☐ Student loans			
	debt Is the claim subject to offset?	debt ☐ Obligations arising out of a separation agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify MEDICAL		

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Debtor :	William Crudden Elizabeth Crudden		Case number (if known)	
4.4	TRUGREEN	Last 4 digits of account number	5367	\$256.65
	Nonpriority Creditor's Name 1790 KIRBY PKWY SUITE 300	When was the debt incurred?	2018	
	Germantown, TN 38138 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify LAWN SEF	RVICE	
4.4	Visa Dept Store National Bank/Macy's	Last 4 digits of account number	0310	\$523.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053	When was the debt incurred?	Opened 05/15 Last Active 4/21/17	
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe propert as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	□ Yes	■ Other. Specify Charge Ac	count	
	-			
Part 3:			and the Line III Boat A and E	
is tryir have n	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts the d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 did you		
	ICAN EXPRESS DX 360001	 :	Part 1: Creditors with Priority Unsecured Clai	
	auderdale, FL 33336-0001	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Name ar	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	can Profit Recovery /	Line 4.43 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clai	ms
	W 12 Mile Road, Ste 379		Part 2: Creditors with Nonpriority Unsecured	Claims
ı allıll	ngton, MI 48331-5608	Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 did you	_	
INC / A			Part 1: Creditors with Priority Unsecured Clai Part 2: Creditors with Nonpriority Unsecured	
AMEX 555 ST	_	•	Part 2: Creditors with Nonpriority Unsecured	Ciaiins

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Debtor 1 William Crudden Debtor 2 Elizabeth Crudden		Case number (if known)
	Last 4 digits of account number	
Name and Address CAPITAL MANAGMENT SERVICES	On which entry in Part 1 or Part 2 did Line 4.16 of (<i>Check one</i>):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
CITIBANK / CITI VISA 698 1/2 SOUTH OGDEN ST Buffalo, NY 14206-2317		■ Part 2: Creditors with Nonpriority Unsecured Claims
Dullaio, NT 14200-2317	Last 4 digits of account number	
Name and Address CARSON SMITHFIELD MERRICK BANK	On which entry in Part 1 or Part 2 did Line 4.32 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
PO BOX 9216 Old Bethpage, NY 11804		
	Last 4 digits of account number	
Name and Address CARSON SMITHFIELD MERRICK BANK	On which entry in Part 1 or Part 2 did Line 4.32 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
PO BOX 6603979 Dallas, TX 75266-0397	Last 4 digits of account number	— Fart 2. Ordanois with Horipholity of Secured Glainis
Name and Address	On which entry in Part 1 or Part 2 did	,
CITI CARDS PO BOX 6077	Line 4.16 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Sioux Falls, SD 57117	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?		
CLERK, Tippecanoe Co. Court CAUSE # 79D01-1805-CC-000694	Line 4.1 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
301 Main St. Lafayette, IN 47901		— Fait 2. Oreditors with Northholity of secured dialins
Larayette, III 47301	Last 4 digits of account number	
Name and Address CLERK, Tippecanoe Co. Court On which entry in Part 1 or Pa		you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
CAUSE #79D01-1806-CC-000876 301 Main St. Lafayette, IN 47901		Part 2: Creditors with Nonpriority Unsecured Claims
Larayette, III 47301	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
CLERK, Tippecanoe Co. Court CAUSE # 79D01-1806-CC-000853	Line <u>4.5</u> of (<i>Check one</i>):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
301 Main St. Lafayette, IN 47901		- Part 2. Greditors with Northholity Orisecured Glaims
Larayette, IN 47501	Last 4 digits of account number	
Name and Address	, , , , , , , , , , , , , , , , , , , ,	
CLERK, Tippecanoe Co. Court CAUSE # 79D01-1806-CC-000923	Line 4.30 of (<i>Check one</i>):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
301 Main St.		Part 2: Creditors with Nonpriority Unsecured Claims
Lafayette, IN 47901	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	,
Client Services CHASE	Line 4.13 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
3451 Harry S. Truman Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims
Saint Charles, MO 63301	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	· •
COMENITY - MEIJER PO BOX 6589823	Line 4.21 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
San Antonio, TX 78265-9123	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
	Last + digits of account number	

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Debtor 1 William Crudden Debtor 2 Elizabeth Crudden		Case number (if known)
	0 111 1 2 5 14 5 10 11	
Name and Address Harris & Harris LTD	On which entry in Part 1 or Part 2 did Line 4.25 of (Check one):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
I U HEALTH / ARNETT CLINIC 111 W Jackson Blvd Suite 400		■ Part 2: Creditors with Nonpriority Unsecured Claims
Chicago, IL 60604		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
JH Portfolio Debt Equities, LLC Attn: Bankruptcy	Line <u>4.30</u> of (<i>Check one</i>):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
5757 Phantom Dr. Ste 225 Hazelwood, MO 63042		— Fart 2. Greditors with Northholity Offsecured Glaims
nazerwood, MO 63042	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Lloyd & McDaniel / AMEX 11405 Park Rd.	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Suite 200		■ Part 2: Creditors with Nonpriority Unsecured Claims
Louisville, KY 40223	Last 4 digits of account number	
Name and Address		Specification and the Commission and the Commission of the test transfer
MACYS / CITIBANK	On which entry in Part 1 or Part 2 did Line 4.44 of (Check one):	D Part 1: Creditors with Priority Unsecured Claims
PO BOX 78008 Phoenix, AZ 85067		■ Part 2: Creditors with Nonpriority Unsecured Claims
Thoenix, AZ 00007	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Merchants & Medical Credit Corp. CAPITAL ONE / KOHLS	Line 4.28 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
6324 Taylor Dr.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Flint, MI 48507	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?
MIDLAND CREDIT MANAGMENT	Line 4.38 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
SYNCHRONY BANK / MIDLAND FUNDING		■ Part 2: Creditors with Nonpriority Unsecured Claims
2365 NORTHSIDE DRIVE		
SUITE 300 San Diego, CA 92108		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
MRS Associates of New Jersey CHASE BANK USA	Line <u>4.13</u> of (<i>Check one</i>):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
1930 Olney Avenue		Part 2: Creditors with Nonphority Onsecured Claims
Cherry Hill, NJ 08003	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Northland Group	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
CITIBANK / CITI VISA SIGNATURE PO Box 390905		■ Part 2: Creditors with Nonpriority Unsecured Claims
MAIL CODE CBK10		
Minneapolis, MN 55439	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Stenger & Stenger Capital One	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
2618 East Paris Ave Se		Part 2: Creditors with Nonpriority Unsecured Claims
Grand Rapids, MI 49546	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
TRUGREEN	Line 4.43 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims

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Debtor 1 William Crudden Debtor 2 Elizabeth Crudden	Case number (if known)
PO BOX 9001128 Louisville, KY 40290-1128	■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,400.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,400.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 115,489.83
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 115,489.83

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Fill in this infor	mation to identify your	case:		
Debtor 1	William Crudden			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth Crudde	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for	
2.1	SUBARU MOTOR FINANCE C/O CHASE PO BOX 78076 Phoenix, AZ 85062-8076	\$300 PER MONTH	
2.2	SUBARU MOTOR FINANCE C/O CHASE PO BOX 78076 Phoenix, AZ 85062-8076	\$300 PER MONTH	

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Fill in this in	formation to identify your	case:			
Debtor 1	William Crudden				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Elizabeth Crudde	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	T OF INDIANA		
Case numbe	r				
(if known)					☐ Check if this is an
					amended filing
Official I	Form 106H				
	ile H: Your Cod	ahtors			12/15
Scriedo	ile II. Tour Cou	CDIOIS			12/15
	nd case number (if known ou have any codebtors? (If	,		as a codebtor.	. •
■ No □ Yes					
□ res					
	n the last 8 years, have you California, Idaho, Louisiana				states and territories include
720.104,		, , , , , , , , , , , , , , , , , , , ,	acree ince, reside, reacre	g.c, and resconding	
_	o to line 3.				
⊔ Yes. [Did your spouse, former spo	use, or legal equivalent li	ve with you at the time?		
in line 2	again as a codebtor only 6D), Schedule E/F (Officia	if that person is a guara	ntor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The credi	itor to whom you owe the debt
				Check all concadics	шас арргу.
3.1				_ Schedule D, line	
Na	me			☐ Schedule E/F, line	e
				☐ Schedule G, line	
Nu Cit	mber Street	State	ZIP Code		
	,				
3.2				☐ Schedule D, line	
Na	me			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	<u> </u>
Nii	mber Street			<u>.</u>	
Cit		State	ZIP Code		

Fill in this information	on to identify your case:	
Debtor 1	William Crudden	
Debtor 2 (Spouse, if filing)	Elizabeth Crudden	
United States Bank	ruptcy Court for the: NORTHERN DISTRICT OF INDIANA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official For		13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

0.00

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation PRODUCTION ASSOCIATE **SUPERVISOR** Include part-time, seasonal, or **Employer's name SUBARU OF INDIANA DRUG PLASTICS AND GLASS** self-employed work. **Employer's address** Occupation may include student ONE BATTLE DRIVE 5500 ST RD 38 or homemaker, if it applies. Lafayette, IN 47905 OXFORD, IN How long employed there? **5 YEARS 21 YRS**

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5.416.67 4,203.33 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 4. 5,416.67 4,203.33

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Debt Debt		William Crudden Elizabeth Crudden		(Cas	e number (<i>if known</i>)			
Debi	.01 2 _	Liizabetii Gruddeii	-	`	Cas	e namber (# known)	_		
					Fo	or Debtor 1		For Debtor 2 or non-filing spouse	
	Copy	y line 4 here	4.		\$	5,416.67	_	\$ 4,203.33	
					-				
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$_	1,083.33		\$ 780.56	
	5b.	Mandatory contributions for retirement plans	5b.		\$_	0.00		\$ 0.00	
	5c.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c.		\$ \$	195.00		\$ 420.33	
	5d. 5e.	Insurance	5d. 5e.		φ \$	0.00 67.17		\$	
	5f.	Domestic support obligations	5f.		\$	0.00		\$ 0.00	
	5g.	Union dues	5g.		\$	0.00		\$ 0.00	
	5h.	Other deductions. Specify: car lease 1	5h.	.+	\$	483.17	+	\$ 0.00	
		car lease 1 imputed - warranty			\$	99.04		\$ 0.00	
		car lease 2	_		\$_	372.67		\$ 0.00	
		car lease 2 imputed - warranty	_		\$_	99.04		\$ 0.00	
		supplemental life volunteer life	_		\$ \$	62.83 28.17		\$	
			_					· ————————	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,490.42		\$1,200.89_	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,926.25		\$3,002.44_	
8.	8b. 8c. 8d. 8e.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8a. 8b. 8c. 8d. 8e.		\$ - \$ - \$ -	0.00 0.00 0.00 0.00		\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	
	8e. 8f.	•	8e.	•	Φ_	0.00		\$	
		Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.00		\$0.00_	
	8g.	Pension or retirement income	8g.		\$_	0.00		\$ 0.00	
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$_	0.00	+	\$0.00_	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	3	\$_	0.00		\$	
10.		tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,926.25 + \$_		3,002.44 = \$ 5,928	.69
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not stify:	depe					in Schedule J.	.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							.69
								monthly incon	ne
13.	Do y ■	ou expect an increase or decrease within the year after you file this form No.	?						
		Yes. Explain:							

						1					
	in this informa	ation to identify yo	our case:								
Deb	otor 1	William Cruc	dden		Check if this is:						
	otor 2 ouse, if filing)	Elizabeth Cr	udden			☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date:					
Unit	ted States Bankı	ruptcy Court for the	: NORTH	.NA	-	MM / DD / YYYY					
1	se number nown)										
Of	fficial Fo	rm 106J									
So	chedule	J: Your	Exper	ses				12/15			
Be info	as complete ormation. If m	and accurate as	possible.	If two married people arch another sheet to this							
Par		ribe Your House	hold								
1.	Is this a joir										
	□ No. Go to	o line 2. e s Debtor 2 live i	in a sonar	ata hausahald?							
	_		iii a sepai	ate nousenoid?							
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.				
2.	Do you have	e dependents?	■ No								
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?			
	Do not state							□ No			
	dependents	names.						☐ Yes ☐ No			
								☐ Yes			
					-			□ No			
								Yes			
								□ No □ Yes			
3.	Do your exp	oenses include	_	No				□ res			
		f people other to d your depende	han 👝	Yes							
Par		ate Your Ongoi									
exp				uptcy filing date unless y y is filed. If this is a supp							
				government assistance if							
	ficial Form 10		u nave me	iliudeu it on <i>Schedule I. T</i>	our income		Your expe	enses			
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4. \$	i	1,236.00			
	If not includ	ded in line 4:									
	4a. Real e	estate taxes				4a. \$		0.00			
		erty, homeowner's	s, or renter	's insurance		4a. \$ 4b. \$		0.00			
	4c. Home	maintenance, re	pair, and ι	ıpkeep expenses		4c. \$		100.00			
_		owner's associat			mo oquity loons	4d. \$ 5. \$		25.00			
5.	Auditional I	nortgage payme	ents for yo	our residence, such as ho	ne equity loans	5. \$		0.00			

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Deb Deb	or 1 William Crudden or 2 Elizabeth Crudden	Case num	ber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.	\$	90.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	450.00
	6d. Other. Specify:	6d.	\$	0.00
	Food and housekeeping supplies	7.	\$	550.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	150.00
	Personal care products and services	10.	\$	125.00
	Medical and dental expenses	11.	\$	100.00
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	400.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	130.00
	Charitable contributions and religious donations	14.	·	0.00
	Insurance.			0.00
•	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	165.00
	15d. Other insurance. Specify:	15d.	\$	0.00
3.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify: irs	16.	\$	200.00
7 .	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	¢	0.00
	• •	17a. 17b.	·	0.00
	17b. Car payments for Vehicle 2		· —	0.00
	17c. Other Specify:	17c.	·	0.00
	17d. Other. Specify:	17d.	>	0.00
3.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.	*	
Э.	Other real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
١.	Other: Specify: pets - 3 dogs	21.	+\$	250.00
,	· · · <u>· · · · · · · · · · · · · · · · </u>			
	Calculate your monthly expenses 22a. Add lines 4 through 21.		\$	4 224 00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	4,221.00
			l : ————	4.004.00
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,221.00
3.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	*	5,928.69
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,221.00
	22a Cubtract your monthly expenses from your monthly income			
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,707.69
4.	Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?			or decrease because of a
	No.			

Fill in this infor	mation to identify your	case:		
Debtor 1	William Crudden			
Bostor 1	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth Crudde	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Forr				_
Declarat	tion About a	ın Individual	Debtor's Schedu	les 12/15
Sig	ın Below			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankruptcy	r forms?
■ No				
☐ Yes. I	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with this	declaration and
X /s/ Wil	liam Crudden		X /s/ Elizabeth Crudd	en
	m Crudden		Elizabeth Crudden	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date	February 14, 2019		Date February 14.	2019

Fill	l in this infor	mation to identify you	r case:					
De	btor 1	William Cruddei	1					
		First Name	Middle Name	I	_ast Name			
	btor 2 ouse if, filing)	Elizabeth Crudd	en Middle Name		_ast Name			
Un	ited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIA	ANA			
	se number _						_	heck if this is an mended filing
St Be	as complete ormation. If r	of Financial	Affairs for Indivi	are filing	together, both are	equally responsib		
Pa	rt 1: Give	Details About Your Ma	arital Status and Where Yo	u Lived I	Before			
1.	What is you	ır current marital statı	us?					
	■ Married Not ma							
2.	During the	last 3 years, have you	lived anywhere other than	n where y	ou live now?			
	■ No □ Yes. Li	st all of the places you	lived in the last 3 years. Do	not includ	e where you live now	٧.		
	Debtor 1 P	rior Address:	Dates Debtor	1	Debtor 2 Prior Ac	ldress:		Dates Debtor 2 lived there
3. stat			ver live with a spouse or le difornia, Idaho, Louisiana, N					
	■ No □ Yes. M	ake sure you fill out Sc	hedule H: Your Codebtors (0	Official Fo	rm 106H).			
Pa	rt 2 Expla	in the Sources of You	ır Income					
4.	Fill in the tot	al amount of income yo	mployment or from operation received from all jobs and have income that you recei	l all busin	esses, including part	-time activities.	/ious calen	ndar years?
	_	II in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	re deductions and sions)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)

Official Form 107

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	otor 1 otor 2		lliam Crue zabeth Cr					Ca	se number (if known)		
	Includand of winnin	le ind ther p ngs. I ach s	ome regard oublic bene f you are fil	dless of wheth fit payments; ing a joint cas the gross inco	ner that inco pensions; rese and you l	ome is taxable. Exental income; into have income that	xamples o erest; divid you recei	dends; money colle ved together, list it	alimony; child supp	royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery
		l C 3. 1	ill ill tile de	cialis.							
					Debtor 1		_		Debtor 2		
					Describe I	of income below.	each (befor	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	13·	List	Certain Pa	vments You	Made Befo	ore You Filed for	r Bankrun	ntcv			
6.		No.	Neither D individual During the No. Yes * Subject	ebtor 1 nor E primarily for a 90 days befor Go to line 7 List below e paid that cr not include to adjustmen or Debtor 2 c 90 days befor Go to line 7 List below e include pay	Debtor 2 has a personal, fore you filed a personal, fore you filed a personal, fore you filed a personal for both have you filed a personal fore you filed a personal filed a personal fore you filed a personal fore you filed a personal filed a	amily, or household for bankruptcy, of to whom you part include payment of an attorney for and every 3 years of the part of bankruptcy, of the whom you part to whom you part of the part of the whom you part of the part of	sumer del old purpos did you pa aid a total ents for do this bankr ars after th sumer del did you pa	ots. Consumer debese." y any creditor a toto of \$6,425* or more mestic support obluptcy case. at for cases filed or ots. y any creditor a toto of \$600 or more ar	tal of \$6,425* or more paid in one or more paid igations, such as control or after the date of tal of \$600 or more	ore? yments and the support a suppo	
	Cred	litor's	s Name an	d Address		Dates of paym	ent	Total amount paid	Amount you still owe	Was this p	payment for
	Inside of which a busing alimon	ers indiction of the control of the	clude your ou are an o you opera	relatives; any fficer, director	general par r, person in roprietor. 11	rtners; relatives o control, or owner	of any general of 20% or	nt on a debt you or eral partners; partn more of their votir	owed anyone who	ou are a gene ny managing	ral partner; corporation agent, including one fo
			Name and			Dates of paym	ent	Total amount	Amount you	Reason fo	r this payment
	IIISIU	101 3	ivanic and	Addiess		Dates of payin	CIIC	paid	still owe	Reasonie	i ilis payment
	inside Includ	er? le pa	yments on		teed or cosi	ey, did you make gned by an inside		•	any property on a	ccount of a	debt that benefited an
	Insid	ler's	Name and	Address		Dates of paym	ent	Total amount	Amount you	Reason fo	r this payment
						. ,		paid	still owe		editor's name

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	btor 1 William Crud btor 2 Elizabeth Cr			Case number (if known)	
Pa	rt 4: Identify Legal	Actions, Repossession	s, and Foreclosures			
9.		ncluding personal injury		y lawsuit, court action, or add s, divorces, collection suits, pat		
	□ No■ Yes. Fill in the de	etails.				
	Case title Case number		Nature of the case	Court or agency	Status of the	he case
	AMEX vs ELIZAB CAUSE # 79D01-1		CIVIL JUDGMENT	CLERK, Tippecanoe Co. Court 301 Main St. Lafayette, IN 47901	Pending On app Conclud	eal
	AMEX VS Elizabe CAUSE #79D01-1		COLLECTIONS	CLERK, Tippecanoe Co. Court 301 Main St. Lafayette, IN 47901	Pending On app Conclud	eal
	CAPITAL ONE VS CAUSE # 79D01-1	William Crudden 806-CC-000853	COLLECTIONS	CLERK, Tippecanoe Co. Court CAUSE # 79D01-1806-CC-000853 301 Main St. Lafayette, IN 47901	Pending ☐ On app ☐ Conclud	eal
	Llyod & McDaniel PORTFOL VS WILLIAM CRU 79D01-1806-CC-0	DDEN	COLLECTION	CLERK, Tippecanoe Co. Court 301 Main St. Lafayette, IN 47901	Pending □ On app □ Conclud	eal
10.		nd fill in the details below		rty repossessed, foreclosed,	garnished, attache	d, seized, or levied?
	Creditor Name and	Address	Describe the Property Explain what happened		Date	Value of the property
11.		o make a payment beca	etcy, did any creditor, incl ause you owed a debt?	uding a bank or financial ins	titution, set off any	amounts from your
	Creditor Name and	Address	Describe the action the	creditor took	Date action was taken	Amount
12.		you filed for bankrupto eiver, a custodian, or a		rty in the possession of an a	ssignee for the ben	efit of creditors, a

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Debte Debte		William Crudden Elizabeth Crudden		Case number	(if known)	
Part	5:	List Certain Gifts and Contribution	ns			
•	I N	n 2 years before you filed for bank No Yes. Fill in the details for each gift.	ruptcy	, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts per p	with a total value of more than \$60 person on to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
	Addr		ı			
•	• N	n 2 years before you filed for bank No Yes. Fill in the details for each gift or o		, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts more Char	or contributions to charities that than \$600 city's Name ress (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Part	6:	List Certain Losses				
	or gai	n 1 year before you filed for bankrumbling? No Yes. Fill in the details.	uptcy c	or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
		cribe the property you lost and the loss occurred	Inclu	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Part	7 :	List Certain Payments or Transfer		, ,		
C	onsu	ulted about seeking bankruptcy or	prepa	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	J N	No				
ı	Y	es. Fill in the details.				
	Addr Emai	on Who Was Paid ess il or website address on Who Made the Payment, if Not '	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	79 W Fifth Chic	rn Law LLC V. Monroe St. n Floor cago, IL 60603 goros@yahoo.com		Attorney Fees - \$1575 Filing Fee - \$310	Payment made in installments between 4/26/2017 and 6/04/2018	\$1,885.00
p	romi		ditors	did you or anyone else acting on your behalf pay or to make payments to your creditors? isted on line 16.	or transfer any prope	rty to anyone who
ı	- N	No				
		es. Fill in the details.			_	
	Pers Addr	on Who Was Paid ess		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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William Crudden Debtor 1 Debtor 2 Elizabeth Crudden Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Nο Yes. Fill in the details. Last 4 digits of Last balance Name of Financial Institution and Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Part 10: Give Details About Environmental Information

Address (Number, Street, City, State and ZIP Code)

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Describe the property

Where is the property?

(Number, Street, City, State and ZIP

Value

Nο

Owner's Name

Yes. Fill in the details.

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Debtor 1 William Crudden
Debtor 2 Elizabeth Crudden

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort all notices, releases, and proceedings the	at you know about, regardless of when	they occurred.						
24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of	any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envir	onmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business or	,							
27.	Within 4 years before you filed for bankrupt	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, e	either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fill in the details below for each business.								
	Business Name	Describe the nature of the business	Employer Identification numbe						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.					
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	ccy, did you give a financial statement to		ude all financial					
	No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor	1 William Crudden		
Debtor	2 Elizabeth Crudden		Case number (if known)
with a b	e and correct. I understand that making a false st pankruptcy case can result in fines up to \$250,00 C. §§ 152, 1341, 1519, and 3571.		t, concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Wi	lliam Crudden	/s/ Eli:	lizabeth Crudden
Willia	m Crudden	Elizab	beth Crudden
Signat	ure of Debtor 1	Signat	ature of Debtor 2
Date	February 14, 2019	Date	February 14, 2019
Did you	attach additional pages to Your Statement of Fi	nancial /	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
_ ′	ı pay or agree to pay someone who is not an atto	rney to h	help you fill out bankruptcy forms?
No			
☐ Yes.	Name of Person Attach the Bankruptcy Per	ition Prep	eparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	
\$7	5	administrative fee	
+ \$1	5_	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Indiana

In r	William Crudden Elizabeth Crudden	Case No.	
	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTO	ORNEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the atto compensation paid to me within one year before the filing of the petition in bankrupto be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrupton of the debtor of the debt	cy, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	3,600.00
	Prior to the filing of this statement I have received	\$	1,575.00
	Balance Due		2,025.00
2.	\$310.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other person	on unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the		
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspe	ects of the bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in d b. Preparation and filing of any petition, schedules, statement of affairs and plan whi c. Representation of the debtor at the meeting of creditors and confirmation hearing, d. [Other provisions as needed] All services, except those identified in paragraph 7 below, that a debtor's bankruptcy objectives including but not limited to: 	ch may be required; and any adjourned hear	ings thereof;
	 (1) File the certificate required from the individual debtor from ar counseling agency for prepetition credit counseling; (2) Preparation and filing of all locally required forms; (3) Representation of the debtor at the § 341 meeting; (4) Amend any list, schedule, statement, and/or other document necessary or appropriate; (5) Prepare and file any motion as may be necessary or appropria a lien on exempt property, to obtain credit, to sell or abandon professor of the confirmation hearings; (7) Negotiate valuation of secured claims and/or present evidence (8) Compile and forward to the trustee and the United States trusty (9) Removal of garnishments or wage assignments; (10) Negotiate, prepare and file reaffirmation agreements; (11) Consult with the debtor and if there is a valid defense or expand automatic stay; (12) File the debtor's certification of completion of instructional of (Official Form 423); (13) Timely review all filed proofs of claim, and object to and file (14) Oversee the filing of all operating reports in chapter 13 and a (15) Represent the debtor in connection with motions for dismissing the context of the context of the connection /li>	required to be filed wate including but no operty, and to assume thereon at confirmatee any documents olanation, respond to course concerning for proofs of claim as a any required in chaps	with the petition as may be t limited to a motion to avoid ne or reject a lease; nation hearing; and information requested; o a motion for relief from the inancial management ppropriate; eter 13;

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Notwithstanding any agreement to the contrary, supplemental fees may only be awarded by the court if, after

(16) Disclose any agreement and fee arrangement regarding the potential retention of co-counsel.

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In re	William Crudden Elizabeth Crudden	Case No.	Case No.	
	Debtor(s)	_		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

performing a review of Firm's detailed accounting, the court determines that additional fees are warranted. The court may be more likely to award additional fees for extraordinary additional work such as Firm's work on dischargeability actions, adversary proceedings and heavily litigated matters that are not listed in Paragraph 6 above. Client may contest any fee that Firm petitions the Court to award.

<u> </u>	CERTIFICATION
I certify that the foregoing is a complete statement of this bankruptcy proceeding.	of any agreement or arrangement for payment to me for representation of the debtor(s) in
February 14, 2019 <i>Date</i>	Is/ Harry Zembillas Harry Zembillas Signature of Attorney Chern Law LLC 301 S. Main St Crown Point, IN 46307 219-661-6000 Fax: 219-663-4563 dikigoros@yahoo.com Name of law firm

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United States Bankruptcy Court Northern District of Indiana

	Northern District of Indiana					
In re	William Crudden Elizabeth Crudden	Debtor(s)	Case No. Chapter	13		
		Botor(s)	Chapter			
	VERII	FICATION OF CREDITOR M	IATRIX			
	e above-named debtor(s) verifies und knowledge.	nder penalty of perjury that the attached list of	creditors is tru	e and correct to the best of		
Date:	February 14, 2019	/s/ William Crudden William Crudden				
		Signature of Debtor				
Date:	February 14, 2019	/s/ Elizabeth Crudden				

Elizabeth Crudden Signature of Debtor AMERICAN EXPRESS PO BOX 360001 FORT LAUDERDALE, FL 33336-0001

AMERICAN PROFIT RECOVERY / TRUGREEN 34005 W 12 MILE ROAD, STE 379 FARMINGTON, MI 48331-5608

AMERICAN RECOVERY SERVICE INC / ARSI AMEX 555 ST. CHARLES DR, SUITE 100 THOUSAND OAKS, CA 91360-3983

AMEX
CORRESPONDENCE/BANKRUPTCY
PO BOX 981540
EL PASO, TX 79998

BORROWERSFIRST EMAIL: BORROWERSFIRST@FA-SERVICING.COM SAN DIEGO, CA 92150

CAPITAL MANAGMENT SERVICES CITIBANK / CITI VISA 698 1/2 SOUTH OGDEN ST BUFFALO, NY 14206-2317

CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

CAPITAL ONE / FURNIT ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

CARSON SMITHFIELD MERRICK BANK PO BOX 9216 OLD BETHPAGE, NY 11804 CARSON SMITHFIELD MERRICK BANK PO BOX 6603979 DALLAS, TX 75266-0397

CENTRAL CREDIT SERVICES / FURNITURE ROW CAPITAL ONE / JH PORTFOLIO DEBT EQUITIES O BOX 390916
MINNEAPOLIS, MN 55439-0916

CHASE CARD SERVICES CORRESPONDENCE DEPT PO BOX 15298 WILMINGTON, DE 19850

CHASE MORTGAGE ATTN: CASE RESEARCH & BANKRUPTCY PO BOX 24696 COLUMBUS, OH 43224

CITI ARDS / MACYS PO BOX 6167 SIOUX FALLS, SD 57117-6167

CITI CARDS PO BOX 6077 SIOUX FALLS, SD 57117

CITIBANK HILTON HONORS CENTRALIZED BANKRUPTCY PO BOX 790034 ST LOUIS, MO 63179

CITICARDS - AMERICAN AIRLINES CITICORP CREDIT SERVICES/ATTN: CENTRALIZ PO BOX 790040 SAINT LOUIS, MO 63179

CITIFINANCIAL ATTN: BANKRUPTCY 605 MUNN DR FORT MILL, SC 29715 CLERK, TIPPECANOE CO. COURT CAUSE # 79D01-1805-CC-000694 301 MAIN ST. LAFAYETTE, IN 47901

CLERK, TIPPECANOE CO. COURT CAUSE #79D01-1806-CC-000876 301 MAIN ST. LAFAYETTE, IN 47901

CLERK, TIPPECANOE CO. COURT CAUSE # 79D01-1806-CC-000853 301 MAIN ST. LAFAYETTE, IN 47901

CLERK, TIPPECANOE CO. COURT CAUSE # 79D01-1806-CC-000923 301 MAIN ST. LAFAYETTE, IN 47901

CLIENT SERVICES CHASE 3451 HARRY S. TRUMAN BLVD SAINT CHARLES, MO 63301

COMENITY - MEIJER PO BOX 6589823 SAN ANTONIO, TX 78265-9123

COMENITY BANK/CTPR&BKS ATTN: BANKRUPTCY DEPT PO BOX 182125 COLUMBUS, OH 43218

COMENITY BANK/LANE BRYANT ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

COMENITYBANK/MEIJER ATTN: BANKRUPTCY PO BOX 182273 COLUMBUS, OH 43218 CREDIT CONTROL
DEPARTMENT STORES NATIONAL BANK / MACYS
PO BOX 31179
TAMPA, FL 33631-3179

DEVILLE MGMT ATTN: BANKRUPTCY PO BOX 1987 COLLEYVILLE, TX 76034

ELASTIC.COM PO BOX 950276 LOUISVILLE, KY 40295

HARRIS & HARRIS LTD I U HEALTH / ARNETT CLINIC 111 W JACKSON BLVD SUITE 400 CHICAGO, IL 60604

HOME POINT FINANCIAL C NMLS#7706 9 ENTIN RD ST PARSIPPANY, NJ 07054

INDIANA UNIVERISTY HEATLH 250 N. SHADELAND AVE INDIANAPOLIS, IN 46219

INTERNAL REVENUE SERVICE (INDIANA)
COMPLIANCE SERVICES
PO BOX 44985
STOP SB-380
INDIANAPOLIS, IN 46244

IU HEALTH
PO BOX 4374
CHICAGO, IL 60680

JH PORTFOLIO DEBT EQUITIES, LLC ATTN: BANKRUPTCY 5757 PHANTOM DR. STE 225 HAZELWOOD, MO 63042

JN PORTFOLIO DEBT EQUITIES, LLC ATTN: BANKRUPTCY 5757 PHANTOM DR. STE 225 HAZELWOOD, MO 63042

KOHLS/CAPITAL ONE KOHLS CREDIT PO BOX 3120 MILWAUKEE, WI 53201

LENDING CLUB CORP 71 STEVENSON ST STE 300 SAN FRANCISCO, CA 94105

LLOYD & MCDANIEL / AMEX 11405 PARK RD. SUITE 200 LOUISVILLE, KY 40223

LLYOD & MCDANIEL / CITIBANK / JH PORTFOL 11405 PARK ROAD, SUITE 200 PO BOX 23200 LOUISVILLE, KY 40223

LOANCARE SERVICING CTR 3637 SENTARA WAY VIRGINIA BEACH, VA 23452

MACYS / CITIBANK PO BOX 78008 PHOENIX, AZ 85067

MERCHANTS & MEDICAL CREDIT CORP. CAPITAL ONE / KOHLS 6324 TAYLOR DR. FLINT, MI 48507

MERRICK BANK/CARDWORKS ATTN: BANKRUPTCY PO BOX 9201 OLD BETHPAGE, NY 11804 MIDLAND CREDIT MANAGMENT SYNCHRONY BANK / MIDLAND FUNDING 2365 NORTHSIDE DRIVE SUITE 300 SAN DIEGO, CA 92108

MIDLAND FUNDING 2365 NORTHSIDE DR STE 300 SAN DIEGO, CA 92108

MRS ASSOCIATES OF NEW JERSEY CHASE BANK USA 1930 OLNEY AVENUE CHERRY HILL, NJ 08003

NORTHLAND GROUP CITIBANK / CITI VISA SIGNATURE PO BOX 390905 MAIL CODE CBK10 MINNEAPOLIS, MN 55439

SERVICE MERCHANDISE/SAMUELS JEWELRY ATTN: BANKRUPTCY PO BOX 182273 COLUMBUS, OH 43218

SETERUS, INC. ATTN: BANKRUPTCY PO BOX 1077 HARTFORD, CT 06143

STENGER & STENGER CAPITAL ONE 2618 EAST PARIS AVE SE GRAND RAPIDS, MI 49546

STERLING JEWELERS, INC. ATTN: BANKRUPTCY PO BOX 1799 AKRON, OH 44309

SUBARU MOTOR FINANCE C/O CHASE PO BOX 78076 PHOENIX, AZ 85062-8076 SYNCB/TOYS R US ATTN: BANKRUPTCY PO BOX 965060 ORLANDO, FL 32896

SYNCHRONY BANK/ JC PENNEY ATTN: BANKRUPTCY DEPT PO BOX 965060 ORLANDO, FL 32896

SYNCHRONY BANK/ JC PENNEYS ATTN: BANKRUPTCY DEPT PO BOX 965060 ORLANDO, FL 32896

SYNCHRONY BANK/MEIJER ATTN: BANKRUPTCY PO BOX 965060 ORLANDO, FL 32896

TARGET CARD SERVICES MAIL STOP NCB-0461 MINNEAPOLIS, MN 55440

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34051 GRATIOT AVE
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1790 KIRBY PKWY
SUITE 300
GERMANTOWN, TN 38138

TRUGREEN
PO BOX 9001128
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VISA DEPT STORE NATIONAL BANK/MACY'S ATTN: BANKRUPTCY PO BOX 8053 MASON, OH 45040